
Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

IN THE DISTRICT COURT FOR THE _____ JUDICIAL DISTRICT
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF _____

<p>_____, Petitioner, vs. _____, Respondent.</p>	<p>Case No. _____ ACKNOWLEDGMENT OF SERVICE</p>
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I, _____, the ☐ Petitioner ☐ Respondent in the above-entitled action, admit and acknowledge that service of a copy of the _____

_____ was made on me because I received them on the _____ day of _____.

I certify that [check all that apply]:

☐ I am not in the uniformed services as defined by the Servicemembers Civil Relief Act of 2003; **or**

☐ I am in the uniformed services as defined by the Servicemembers Civil Relief Act of 2003.

I understand and waive my rights under the Act; **or**

☐ I am in the uniformed services as defined by the Servicemembers Civil Relief Act of 2003. I do not waive my rights under the Act.

☐ I submit to the jurisdiction of this court, decline to plead, waive hearing, and agree that a final decree be entered.

CERTIFICATION UNDER PENALTY OF PERJURY

I certify under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.

Date: _____

Typed/Printed Name

Signature